

SUMMARY FORM

COLLECTIVE BARGAINING AGREEMENT PUBLIC SECTOR / NON-POLICE & NON-FIRE

Section I: Agreement Details

Public Employer: Central Regional BOE County: Ocean
 Employee Organization: Central Regional Administrative Office Personnel Association Employees in Unit: 7
 Base Year Contract Term: 7/1/2012 New Contract Term 7/1/2012 6/30/2015
 Type of Settlement: ☐ Mediated Settlement ☐ Fact-Finder Recommendation ☒ Voluntary Settlement ☐ Super Conciliation

| | Column A Base Year - Total Costs (Last Year of Previous agreement) | Column B New Base Year - Total Costs (First Year of Successor agreement) |
|--------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| Section II: Economic | | |
| Item 1 Salary | 340,130.00 | 349,809.00 |
| Item 2 Increment | \$ | \$ |
| Item 3 Longevity | \$ | \$ |
| Item 4 | | |
| Item 5 | | |
| Item 6 | | |
| Item 7 | | |
| Item 8 | | |
| Item 9 | | |
| Item 10 | | |
| Item 11 | | |
| Item 12 | | |
| Any additional items list on separate sheet Additional Items | | |
| Section III: Totals - Sum of costs in each column | 340,130.00 (Total) | 349,809.00 (Total) |

Section IV: Analysis of new successor agreement

NEW AGREEMENT ANALYSIS

Total Base Year (previous agreement) _____
 Effective Date (m/d/yyyy) 7/1/12 7/1/13 7/1/14
 Percent Increase 2.5 2.5 2.5
 Total cost of increase .. 349,809 358,490 359,383
 Total base salary (successor agreement)

Section V: Impact of Settlement - average annual increase over term of agreement

Percentage Impact (average per year over term of agreement) 1.89%
 Dollar Impact (average per year over term of agreement) 6,418

Section VI

Health Insurance (Indicate costs associated on each line)

| | Base Year | Year 1 | Year 2 | | | |
|------------------------------|------------------|------------------|------------------|--------|------|------|
| Cost of Health Plan | 88,000 | 98,560 | 98,560 | | | |
| Employee Contributions | 8,000 | 8,000 | 8,000 | ← 5200 | 5800 | 6300 |
| Prescription | 28,000 | 29,960 | 30,540 | | | |
| Dental | 580 | 580 | 580 | | | |
| Vision | 93 | 93 | 93 | | | |

The undersigned certifies that the foregoing figures are true and is aware that if any of the foregoing items are false, s/he is subject to punishment.

Section VII

Prepared by: Kevin O'Shea Title: BA/BS
 Signature: [Signature] Date: 11/5/2014